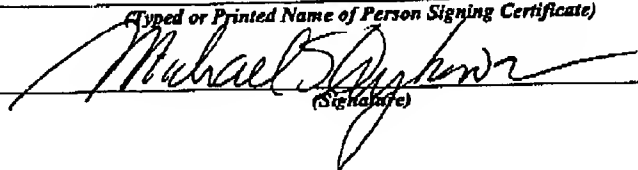



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DEC 27 2005

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 121027-084
Applicant(s): Naoto OHASHI et al.			
Application No. 09/997,652	Filing Date November 29, 2001	Examiner Karin Reichle	Group Art Unit 3761
Invention: DISPOSABLE DIAPER			
<p>I hereby certify that this <u>Amendment, Amendment Transmittal, Extension of Time and Fee Transmittal</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)</p> <p>on <u>December 27, 2005</u> (Date)</p> <p style="text-align: right;"><u>Michael S. Gzybowski</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

P18/REV02

P. 02/16
DEC 27 2005

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 121027-084	
Applicant(s): Naoto OHASHI et al.						
Application No. 09/997,652	Filing Date November 29, 2001	Examiner Karin Reichle	Customer No. 35684	Group Art Unit 3761	Confirmation No. 7387	
Invention: DISPOSABLE DIAPER						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	9 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 12-2136 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: December 27, 2005			
Filed via facsimile transmission			<div style="border: 1px solid black; padding: 5px;"> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) <div style="text-align: right;">12/28/2005 ABINAS 00000020 122136 0999763</div> Signature of Person Mailing Correspondence Typed or Printed Name of Person Mailing Correspondence </div>			
cc:						